

CARES COMMISSION POST HEARING SUMMARY

VISN 3 New Jersey Health Care System
Lyons, NJ hearing
1:00 p.m. September 15, 2003

- I. Commissioners in Attendance:
- a. Everett Alvarez, Jr., Chairman
 - b. Charles Battaglia, Commissioner
 - c. Al Zamberlan, Hearing Chairman
- II. VISN 3 Market Area Addressed: New Jersey Market
- III. Market Area Summary

Market Area (Facility)	Planning Initiative (met criteria)	Market Plan Recommendation	DNCP Recommendation
NJ	Proximity - East Orange (not selected as PI)	Not addressed – due to urban nature of market and excessive travel times	Not addressed
NJ	Inpatient Care - Medicine - Psychiatry	Not addressed	New construction and conversion of vacant space for inpatient medicine and psychiatry
NJ	Outpatient Care - Primary Care - Specialty Care	Not addressed	Expansion of in-house space via new construction, conversion of vacant space, and community contracts. VA/DoD CBOC proposed for Ft. Monmouth, NJ. New CBOC for Passaic County included but not in high priority implementation group
NJ	Enhanced Use	Continue enhanced use lease of golf course located on Lyons campus. Lyons campus was identified among the top 15 high potential enhanced use lease opportunities for VHA.	Develop long-term leases and public/private development of VA buildings and land.
NJ	Collaboration	Collocate the Newark VBA Regional Office into currently available VHA space at Lyons	Collocate the Newark VBA Regional Office into currently available VHA space at Lyons
NJ	Extended Care	Not addressed	Renovation to remedy space deficiencies.
NJ	SCI	Market plan recommended relocation of SCI unit from East Orange to Bronx.	East Orange will maintain SCI unit.

IV. Brief Description of Hearing Testimony

a. Panel 1: Network Leadership

James J. Farsetta, VISN 3 Network Director, accompanied by:
Kenneth Mizrach, Director, VA New Jersey Healthcare System
Michael Sabo, Director, VA Hudson Valley Healthcare System
Robert S. Schuster, Director VA Medical Center, Northport, NY
John J. Donnellan, Jr., Director, VA New York Harbor Healthcare System
Erik Langhoff, MD, representing the Director, VAMC, Bronx, NY
John F. McCourt, Director, VBA Regional Office, Newark

The VISN leadership summarized the CARES process in VISN 3 plan as presented in their written testimony, first citing its collaboration with its stakeholders and reliance on the model the national office provided to identify “CARES gaps,” then citing its market plans as they were structured both before and after input from VA’s central VHA office in order to address the specific gaps. Leadership highlighted an increase in patients seeking VA care in the region over the last few years as well as its aging facilities and maintenance costs involved. Highlighted also was the role of the VISN in VA’s fourth mission.

In response to questions, leadership indicated, with regard to East Orange and Lyons, that it did not consider consolidating the two campuses, even considering the decline in the number of enrollees because, in looking at the projected population data (with no large downtrend until 2014), leadership did not think the numbers would justify such an action. Leadership also noted that it doesn’t believe projecting 20 years out is realistic given the recent history of “revolution in healthcare” delivery. Leadership also indicated that such events as domestic terrorist attacks and recent wars would place larger than anticipated demands on VA services. In addition, citing the specific uses for the Lyons and East Orange campuses, leadership said that major construction would be needed to accommodate the consolidated campus.

Leadership also noted that the IBM model at times forced recommending new construction, counter to “what reasonable people would have done.”

Leadership emphasized that the enhanced use (EU) program ‘is broken,’ with no speedy way to identify a project and reputable investors to take over. Noted was a problem with the time needed to capitalize a project [5-year or short-term time span allowed vs. needed 25-30 years or long-term, so that investors can be more certain of a return on the investment]. Leadership also indicated that the CARES process undermined a potential project; but also indicated a smaller project, i.e., a lease to INS, was done outside of the EU program.

Asked for information on inter-VISN cooperation, leadership indicated patients from VISNs 2 and 4 came to VISN 3 for SCI and cancer treatments and for open-heart surgery, but VISN 3 patients did not travel outside the VISN. However, leadership noted it did not look at NJ in isolation; for example it reviewed the psychiatry services offered by

Montrose and Lyons, determining that contrary to an initial plan, it could not close both sites. Leadership also indicated support for expanding the number of CBOCs to allow for improved access.

Shortage of nurses was cited during a discussion of the possibility of moving certain services (SCI, acute care) to the Bronx or Castle Point as a rationale for not making those changes. Leadership also described its expanded domiciliary for homeless on the Lyons campus but emphasized its non-traditional homeless program, including job training. Leadership indicated its women's programs and ability to handle VA's Fourth Mission are adequate and that the VISN is prepared to serve that population well. In response to questions, leadership indicated cost data was not used in developing the final plan.

Finally, VBA indicated 'one-stop shopping' is deemed most beneficial and it was studying where it would be best to collocate with a medical facility but did not expect to make recommendations until the end of October.

b. Panel 2: Veterans Service Organizations

R. Mike Suter, The American Legion
Paul Wekenmann, Disabled American Veterans
Craig Strauss, Paralyzed Veterans of America
Bernard J. McElwee, Veterans of Foreign Wars
Paul Sutton, Vietnam Veterans of America

The VSO representatives cited concerns with the DNCP's failure to deal with long-term care and mental healthcare, stating that this failure does not allow for a comprehensive look at VA's delivery of healthcare. Concerns also were raised regarding the expansion of outpatient care without prioritizing NJ CBOCs on the national list. Approval was cited for leaving the SCI program in East Orange and Castle Point until such time that the Bronx becomes fully operational. PVA specifically spoke positively about "intra-VISN cooperation" and the 'hub and spoke' SCI care in VA. Keeping status quo for inpatient services was advocated until it is clear that medical advances are in place and the need following current wars is identified. Support was cited for ensuring that VA 24-hour care be available to handle the needs of veterans in assisted living and transitional homeless domiciliaries and for a planned expansion of the psychiatry services in the NJ market. One VSO charged that the DNCP would injure the health care of veterans through fewer beds and less staffing. Support for collocating VBA in Lyons was given, subject to a better means to transport Newark veterans to Lyons.

In response to questions, VSOs recognized the variances in access to VA healthcare nationwide but held to the line that access is the right of all. Compliments were given to the quality of CBOC healthcare, regardless of whether VA-run or contracted out. VSOs generally were pleased with the CARES process, but some raised issue with Dr. Roswell's asking "the field to ... close [various facilities]." There was a general lack of support for expanded CBOC hours in response to a question about instituting extended hours, into the evenings and Saturdays, to alleviate backlogs and make healthcare more accessible for veterans who are younger and

currently employed. Support was cited, however, for providing flexibility to the medical center management to make a decision to expand hours and one VSO said the VSOs could try to sell the idea to their membership.

c. Panel 3: Employee Organizations

The organizations slated to speak withdrew.

V. Commissioner Views

Market Area (Facility)	Planning Initiative (met criteria)	DNCP Recommendation	Commissioner Views
NJ	Proximity - East Orange (not selected as PI)	Not addressed	Not discussed.
NJ	Inpatient Care - Medicine - Psychiatry	New construction and conversion of vacant space for inpatient medicine and psychiatry	Commissioners believe more data is needed to allow for a recommendation.
NJ	Outpatient Care - Primary Care - Specialty Care	Expansion of in-house space via new construction, conversion of vacant space, and community contracts. VA/DoD CBOC proposed for Ft. Monmouth, NJ. New CBOC for Passaic County included but not in high priority implementation group	Commissioners cite lack of data; noted VSOs indicated the model is flawed but support implementing establishment of the named CBOCs. [note: the Ft. Monmouth, NJ CBOC has already opened.]
NJ	Enhanced Use (EU)	Develop long-term leases and public/private development of VA buildings and land.	Commissioners cite VISN's loss of confidence in EU projects resulting from its inability to timely close on a concerted effort; but also note VISN hasn't made other efforts even for planning purposes [except golf course].
NJ	Collaboration	Collocate the Newark VBA Regional Office into currently available VHA space at Lyons	Commissioners note this would be cost effective but note VSO access issue.
NJ	Extended Care	Renovation to remedy space deficiencies.	VISN didn't address because the national office inserted this into the plan. Commissioners note data is soft and thus cannot recommend for inclusion.
NJ	SCI	East Orange will maintain SCI unit.	Commissioners note that PVA and EPVA are supportive until such time that the expanded facility at the Bronx becomes fully operational. [See market plan recommendation.]

VI. Other Comments:

Commissioners noted general lack of data and lack of informative responses to questions did not allow for better recommendations.

VII. Follow-up

Obtain minutes from the Deans Committee regarding affiliate positions on DNCP.
Obtain copy of report with analysis on converting Lyons to an 8-hour operation.
Obtain report on advantages/disadvantages of VBA collocating in Lyons, due end of October.